

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X1960

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

Establishmo Establishmo	ent Name A Blent Addres	veS ss (nu	mber and street, city, state, zip code) New Albert 11 47150	Telephone Number 512 945 9760 Purpose: Routine 2. Follow-up	Date of Inspection (mm/dd/yr)		
Person in C Les Log Responsible Certified Fe	e Person's ood Manag	ger nac	Duran (6/26/24)	3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)			
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS 1 D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE	NARRATIVI	E BELOW AS "R"
Section#	C/NC	R	Narrative To Be Corrected				
144	C		Observed non-food grade packages being nevsed			-2 w	122 S/
191	C		Observed most mode-in-house items lacking date marking Retrain staff				
438	C		Observed valabeled or mislabeled churical sprayers				*
160	Nc		Observed shilligh tags not being mintered for 90 dys				-
177	NC		Observed britisher ine him being loft your				1
2/8	NC	R	Observed drip and puddle in halk-in				uks 3/
245	NC		Observed rags outside of souther solution Petroin shuff				
_ •				ng and disposabl	L		
297	NC		Observe tea, wife, polio nozzles	-		and	1-day
422	NC		Oldered clothing and prise bug on	•	1	1.2	~ '
430	NC			thrown hallway		-Z v	rules 3/
							(EHS)
Received by	y (signature	;):		Inspected by (signature):			
ce:			cc:		ee:	- /	